

**Best Available Copy**

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM 1020)						SERIAL NO. 667648	FILING DATE 9-22-00				
						APPLICATION					
						CLAIMS					
AS FILED		AFTER 1ST ALLOWANCE		AFTER 2ND ALLOWANCE		EKO.	OCP.	EKO.	OCP.	EKO.	OCP.
		EKO.	OCP.	EKO.	OCP.						
1	1					61					
2						62					
3						63					
4						64					
5						65					
6						66					
7						67					
8						68					
9						69					
10						70					
11	1					71					
12						72					
13						73					
14						74					
15						75					
16						76					
17						77					
18						78					
19						79					
20	1					80					
21						81					
22						82					
23						83					
24						84					
25						85					
26						86					
27						87					
28						88					
29						89					
30						90					
31						91					
32						92					
33						93					
34						94					
35						95					
36						96					
37						97					
38						98					
39	1					99					
40						100					
41						TOTAL	61				
42								31			
43								57			
44									1		
45										1	
46											1
47											
48											
49	1										
50											
51	1										
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